

## PART B - FEE(S) TRANSMITTAL

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53377      7590      05/18/2009  
**HOPE BALDAUFF HARTMAN, LLC**  
 1720 PEACHTREE STREET, N.W.  
 SUITE 1010  
 ATLANTA, GA 30309

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

<i>"Steven" Koen Hon Wong</i>	(Depositor's name)
<i>[Signature]</i>	(Signature)
8-14-09	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/771,245	02/03/2004	Stefano Righi	60046.0058USU2	2596

**TITLE OF INVENTION:** METHODS AND SYSTEMS FOR UPDATING AND RECOVERING FIRMWARE WITHIN A COMPUTING DEVICE OVER A DISTRIBUTED NETWORK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$385 **/S/D	\$0	\$0	\$385 **/S/D	08/17/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
RUTTEN, JAMES D	2192	717-172000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<i>Hope Baldauff Hartman, LLC</i>
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. <b>Use of a Customer Number is required.</b>	2..... 3.....

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

*American Megatech, Inc.*

*Norcross, Georgia*

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

- Issue Fee  
 Publication Fee (No small entity discount permitted)  
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 The Director is hereby authorized to charge ~~the amount of~~, any deficiency, or credit any overpayment, to Deposit Account Number ~~321-12345~~ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27

- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date 8-14-09

Typed or printed name "Steven" Koen Hon Wong

Registration No. 44,452

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